



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 9542

SERIAL NUMBER 09/681,303	FILING DATE 03/15/2001  RULE	CLASS 376	GROUP ART UNIT 3641	ATTORNEY DOCKET NO. INE-0044-C2
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## APPLICANTS

Samuel F. Liprie, Lake Charles, LA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/455,579 12/06/1999  
which is a DIV of 08/827,787 04/11/1997 ABN  
which is a DIV of 08/480,307 06/07/1995 PAT 5,857,956  
which is a CIP of 08/257,045 06/08/1994 PAT 5,503,614

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 04/17/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY LA	SHEETS DRAWING 2	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

23413  
CANTOR COLBURN, LLP  
55 GRIFFIN ROAD SOUTH  
BLOOMFIELD, CT  
06002

## TITLE

Flexible source wire for radiation

FILING FEE  RECEIVED 519	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 04/17/2001				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> LA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 31  <b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 23413				
<b>TITLE</b> Flexible source wire for radiation				
<b>FILING FEE RECEIVED</b> 519	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	